

DOMESTIC ABUSE IN LATER LIFE*

Causation Theories

Why do some people hurt family members and/or those they provide care for? How the problem is defined determines where resources are committed for services and interventions. Practitioners who believe stress is the primary cause of abuse will focus on stress reduction methods. Workers who think abuse is part of poor family dynamics will create strategies to improve communication. Those who believe that an imbalance of power and control are central to abuse will work on empowerment strategies and methods that hold abusers accountable. This paper will review research that asks the question: why do perpetrators abuse?

This series of papers** defines domestic abuse in later life as male and female victims, age 50 and older, abused by someone in a trusted, ongoing relationship like a spouse/partner, family member, or caregiver. The victims lived primarily in the community, not institutions (e.g., nursing homes). Studies from the United States and Canada were included.

ARTICLES REVIEWED

Thirteen articles published between 1988 and 2000 were reviewed for this article.

Author(s) Pub. Date	Sample size and demographics	Type(s) of abuse covered [§]	Selected finding(s) (page number/s in parentheses)
Phillips, et al 2000	93 cases of women aged 55+ caring for dependent spouse or other elder family member	Verbal and physical abuse; being threatened by or having gun or knife used on them – all by the elder for whom they were caring.	• “Other investigators...have suggested an important reason for abuse of caregivers is cognitive impairment of the elder. These data do not support that assertion.” (138)
Reis and Nahmiash 1998	341 cases of elders (aged 55+) being cared for by unpaid family/friends, in Montreal, Canada. Abuse was assessed	Physical, psycho-social, and financial abuse; both passive and active neglect	• “[T]he caregiver stress theory of abuse is not supported by the findings of this study. Nor does caregiver burden consequent to increased impairment or need for ADL [activities of daily living] assistance signal abuse.” (478)

*This series of articles is dedicated to Dr. Rosalie Wolf, internationally renowned researcher on elder abuse and domestic abuse in later life. We miss her gentle guidance, wisdom, and dedication to elder victims.

♦ This article is part of a series of papers examining research on domestic abuse in later life. To link to the other articles, see the note at the conclusion of this paper.

* For a chart with a more detailed description of the different definitions of abuse, see the National Center on Elder Abuse website at www.elderabusecenter.org.

	as “likely” in 69 cases; “not likely” in 272 cases		
Lachs, et al 1997 (a)	2,812 adults 65 and older from a stratified community sample in CT; 47 were substantiated cases	Physical abuse, neglect, exploitation	<ul style="list-style-type: none"> Depression, urinary incontinence, and prevalence of chronic disease were all NOT associated with abuse. (472)
Reis and Nahmiash 1997	6 groups from Montreal, Canada were compared: a family caregiver group (total caregivers 136) and a care receiver (age 55+) group (total care receivers 128) for confirmed abuse cases receiving services; confirmed nonabuse cases receiving services; and confirmed nonabuse cases not receiving services.	Physical, psycho-social, and financial abuse; both passive and active neglect	<ul style="list-style-type: none"> “Caregiver stress does not distinguish abusers and non-abusers who receive agency assistance....Greater caregiver stress is...directly connected with needing help and being an agency client, but not with abuse. Stress is only linked with abuse indirectly, through greater caregiver depression....” (351) “Abused care receivers are no more disagreeable or more neurotic than care receivers who are not abused.” (351)
Wolf and Pillemer 1997	73 abused women aged 60+ from 4 US cities. 22 were abused by husband, 51 by children (review of written case assessment data)	Physical and psychological abuse, neglect, financial exploitation	<ul style="list-style-type: none"> 76.6% of adult child abusers were somewhat to entirely financially dependent on abused mother. (331) 64.6% of adult child abusers were somewhat to entirely dependent on abused mother for housing. (331)
Harris 1996	5168 couples 19+ from the 1985 U.S. Family Violence Resurvey, separated into under 60 (4476) and 60+ (842); violence in the past year was reported by 819 couples aged 19-59 and 49 couples 60+	Physical violence	<ul style="list-style-type: none"> “Spouse abuse over 60 is not significantly different from spouse abuse in the under 60 population.” (24) There was a significant positive relationship between perceived stress and couple violence and the depression index and couple violence in both older and younger groups. (19) “Nine of the 17 risk factors included in this study were significantly related to couple violence in the over 60 subsample...education, racial/ethnic group, family income, verbal aggression, drug abuse, reasoning,

			depression, perceived stress, and marital conflict.” (19)
Seaver 1996	132 women aged 50+ who have attended older abused women’s program in Milwaukee, WI	Unspecified	<ul style="list-style-type: none"> • Eleven of the husbands (14%) were dependent on the women for caregiving. (15) • 35 (66%) of the adult children were financially dependent on their mothers. (15)
Korbin et al 1995	23 adult offspring abusers of elders (age 60+); 21 parent abusers of children (age 2-5) in Ohio	Physical abuse	<ul style="list-style-type: none"> • Approximately 1/4 of elder abusing adult offspring were subjected to abusive behaviors by their parents. (7) • “These results suggest that while intergenerational transmission of family violence is not an inevitable process, it is a more useful construct for explaining violence towards children than violence towards elder parents.” (1)
Podnieks 1992 (b)	42 elder abuse victims in Canada identified through Podnieks, 1992(a) study	Physical and psychological abuse, neglect and financial exploitation	<ul style="list-style-type: none"> • “Victims revealed that their own parents had used physical force to ensure compliance when they were growing up. Victims also reported violence between their parents and siblings. Social learning model would appear to be a relevant theory.” (104)
Brown 1989	Random sample of 37 Southwest reservation-dwelling Navajo aged 60+, and their family members; 22 cases of elder abuse found	Neglect, verbal/psychological and physical abuse, and financial exploitation	<ul style="list-style-type: none"> • The more the elder perceived as dependent by family, the more frequent neglect. (26) • Daily hours of help needed were not related to abuse. (26) • The fewer hours of family care provided, the greater the likelihood of neglect. (29) • The greater the number of hours of family care provided, the greater the likelihood of physical abuse and exploitation. (29) • Sharing caregiver responsibilities raised risk of abuse. (30)
Godkin, et al 1989	59 abused elders (60 years and older) compared to 49 non-abused elders, both served by a Massachusetts home care program	Physical, psychological, and material abuse; active and passive neglect by a caregiver	<ul style="list-style-type: none"> • “[M]embers of abusive families are more likely to have emotional problems which contribute to interpersonal difficulties. Abused elders are not more dependent on caregivers for many of their daily needs. However, the abused elderly

			<p>and their caregivers have become increasingly interdependent prior to the onset of abuse because of the loss of other family members, increased social isolation, and the increased financial dependency of the perpetrator on the elderly person.” (207)</p> <ul style="list-style-type: none"> • “There were no significant differences between abused/neglected elderly with respect to the numbers of impairments requiring attention, nor the numbers of prescribed medications. A significant percentage of the maltreated elderly was reported to have experienced a recent decline in physical health (81.4%) in contrast to about one-fifth (21.3%) of the non-victimized elders.” (213) • “The relationship between elders and caregivers was considered ‘poor’ in 77.2% of the [abuse] cases and 4.8% of the controls.” (217) • “Caregivers were said to have unrealistic expectations of their elderly counterparts in 67.9% of the abuse/neglect situations. Unrealistic expectations were reported at a rate of 5.6% in the comparison group.” (217) • “An analysis of the data indicates that all four factors under study play a role in cases of elderly abuse/neglect: the characteristics of the elder and caregiver, dependency and exchange relationships, external stresses, and social isolation.” (219) • “...it appears that both abused elders and the abusers experience emotional problems which contribute to interpersonal difficulties in their relationship.” (223)
Pillemer and Finkelhor 1989	Random sample of 2020 community dwelling people aged 65+ in Boston, MA; 46 abused elders were reinterviewed and	Physical assault; psychological abuse; or neglect	<ul style="list-style-type: none"> • “Elder abuse results NOT from the increased needs of victim but from the deviance and dependence of abusers.” (186) • “Overall, the items which distinguished the abused group were

	compared to 215 controls		those pertaining to the abuser and his/her behavior and circumstances, and not items pertaining to the victim.” (183/186)
Pillemer and Finkelhor 1988	Random sample of 2020 community dwelling people aged 65+ in Boston, MA; 46 abused elders were reinterviewed and compared to 215 controls	Physical assault; psychological abuse; or neglect	<ul style="list-style-type: none"> The findings of this study suggest “a fundamental reformation of the problem of elder maltreatment is necessary. In the past, elder abuse was described primarily in analogy with child abuse. The present study suggests that elder abuse has much more in common with spouse abuse than child abuse.” (55)

GENERALIZED FINDINGS

The popular notion that abuse in later life is the result of a frail, dependent elderly person being abused by a stressed caregiver is **not** supported by the research (Phillips, 2000; Reis, 1998 and 1997; Godkin, 1989; Pillemer 1989 and 1988). Only two studies suggested a possible correlation between stress of caregiving and abuse (Harris, 1996; Brown, 1989). In many cases the abuser is dependent on the victim in some way (Wolf and Pillemer, 1997; Seaver, 1996; Godkin, 1989; Pillemer 1989). Some studies found the dynamics of abuse in later life to be similar to those experienced by younger battered women (Harris, 1996; Pillemer, 1988).

Intergenerational abuse is often considered as a possible cause of family violence in later life. This theory postulates that adults who were abused as children may retaliate against their aging parents. Currently not enough research exists to support or rule out this theory. Two studies indicate that intergenerational transmission of violence is not an inevitable process but may be a factor in some cases (Korbin, 1995; Podnieks, 1992b).

Some research indicates that a significant portion of abusers of elders suffer impairments such as substance abuse, mental illness or cognitive impairment. For an examination of this research, see the paper in this series on abusers (add link).

LIMITATIONS OF STUDIES

Numerous limitations in the research on abuse in later life were found. In part because of the lack of financial resources, only a few studies have been large (more than 1,000 respondents) random sample studies (Lachs 1997a; Podnieks, 1992a; Pillemer, 1988). Even these large studies ultimately based their conclusions on relatively small numbers of abuse victims, ranging from 47 to 80. Only one of the random sample studies included cognitively impaired elders (achieved by interviewing other family members), but using the reports of proxies is considered unreliable (The Robert Wood Johnson Foundation, 2001).

All the other studies had serious sampling biases because they were based on elders who were using services of some sort and/or were known to adult protective services or domestic violence programs. This is problematic, because it is clear that many abused elders are isolated and do not come to the attention of professionals or seek help. With one exception (Otiniano, 1998), these studies also involved relatively small samples – 10 to 401, with the majority being under 100. Respecting the confidentiality and safety of victims creates problems with many scientific methods. Very few studies used control groups.

In addition, some elders deny that what they are experiencing is abuse (see, for example, Phillips, 2000), introducing another source of underreporting. Perhaps more importantly, studies have shown that elders' definitions of abuse do not always correspond to professionals' definitions, which may confound findings.

Comparing results across studies is practically impossible. These studies varied widely in: the types of abuse studied, the specific definitions of the types of abuse studied; whether abuse was self-reported or from agency records; the age of respondents (which ranged all the way down to 40); whether the target audience was predominately healthy elders or vulnerable adults; and whether only women or men and women were included.

POTENTIAL IMPLICATIONS

Despite the lack of supporting research, many people still believe caregiver stress is the primary cause of elder abuse. Professionals and policy makers who focus on caregiver stress as the primary cause of elder abuse will make the following fundamental errors:

- Services and policy will be designed to help families and caregivers reduce stress and improve communication. While these practices may lead to a calmer caregiver or family member, they may do nothing to make the victim safer when the dynamics of abuse are rooted in power and control.
- Instead, abuse is seen as mistreatment and not a crime. Reducing stress and improving communication are seen as the job of social services. Criminal justice remedies are not considered. Abusers are not held accountable for their behavior or challenged on their sense of entitlement to treat the older person poorly.
- Stress reduction techniques may recommend that the victim “try harder” to be less difficult to care for. This implies that the victim is to blame for the abusive behavior. Often the victim already believes she is to blame based on what the abuser has repeatedly told her. This message colludes with the batterer by suggesting that some responsibility for the abuse lies with the victim. Victims may stay in unsafe situations longer, trying to fix the relationship rather than focus on their own safety needs.
- Intervention strategies (e.g., safety planning, support groups, protection orders) commonly used by domestic abuse and sexual assault programs are not considered. Referrals may not be made to these agencies.

Since domestic violence professionals and researchers understand the dynamics of power and control from their experience working with younger victims, it is critical that domestic

violence and elder abuse work collaboratively to create safety, support and services for older victims.

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ADDITIONAL RESOURCES

Bergeron, R. (in press) An Elder Abuse Case Study: Caregiver Stress or Domestic Violence? You Decide? *Journal of Gerontological Social Work*.

Brandl, B. (2000) Power and Control: Understanding Domestic Abuse in Later Life. *Generations*. Vol. XXIV, No. II, 39 - 45.

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Wolf, R. (2000) The Nature and Scope of Elder Abuse. *Generations*. Vol. XXIV, No. II, 6 - 12.

For a list of research questions on elder abuse and domestic abuse in later life, go to <http://www.elderabusecenter.org/research/agenda.html>.

For other articles in this series (ADD LINKS TO OTHER 8 ARTICLES).

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[Return to Causation Theories Intro](#)

[Next : Cultural Considerations](#)

[Prev : Abusers](#)